

**BRIGHTON AREA SCHOOLS**

**REQUEST FOR  
ABBREVIATED TEACHING SCHEDULE/JOB SHARE/FULL TIME**

To: \_\_\_\_\_ Date: \_\_\_\_\_  
Administrator

From: \_\_\_\_\_ Building: \_\_\_\_\_  
Staff Member

Present Assignment/Grade/Dept.: \_\_\_\_\_ Present FTE: \_\_\_\_\_

**Requesting:**

Position: \_\_\_\_\_ Building: \_\_\_\_\_

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_ FTE Requested: \_\_\_\_\_

**For Job Share Requests only:**

**Please list partner:** \_\_\_\_\_

**Note:** It is the responsibility of the Employee desiring a shared position to secure a teaching partner from the District's present staff and to abide by all conditions set forth in Article 12, Section C of the Master Agreement between the Brighton Education Association and the Board of Education, as well as the guidelines established by the Administration.

**I understand that this request is being made on the basis of availability of position and assignment by Administration, within the guidelines of the Master Agreement.**

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Staff Member Signature

**Please include summer address and telephone information:**

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone

**Distribution:** Human Resources/Principal/Association

Revised 02/05